

Meeting Notes
Quality Metrics Subcommittee
May 9, 2012

Members present

Paula Block, CHC-Montana Primary Care Association

Dr. Doug Carr, Billings Clinic

Dr. Jonathan Griffin, St. Peter's Medical Group

Janice Mackensen, Mountain Pacific Quality Health Foundation

Craig Hepp, Billings Clinic

Interested Parties present

Lisa Wilson, PLUK

Kris Franqui, Pfizer

John Hoffland, Medicaid Passport to Health Program

Paul Engel, Pfizer

CSI Staff present

Amanda Roccabruna Eby- Note recorder

Chair, Dr. Jon Griffin called the meeting to order at 1:32pm

1. Roll call, approve [notes](#) from last meeting
Dr. Carr moved and Paula Block seconded a motion to approve the notes from the last meeting. The motion passed unanimously.
2. Review MPQH metrics [crosswalk](#)
The group briefly discussed how the crosswalk could be a useful tool for practices.
3. Decide on MT PCMH initial metrics set and provider options
The framework for payment should be used when creating the small list of metrics. Health information exchange can be expanded for other reasons beyond PCMH. The metrics need to be selected based on what will drive payment. The more data the providers have the better. The HIE can structure the data they receive based on PCMH requirements. Under the HIE robust analytics and reporting box on the grand scheme diagram, a box could be added for quality bonus. Out of the 10 diabetic metrics, we could just keep 3. In the payment bonus, of the 6 chronic diseases, there should be one measure from each and then a couple more added overall. The bonus payment report should be kept to 10 or less metrics. The subcommittee should create the shortlist using the metrics that have evidence backing up their payments. The 3 best metrics for diabetic patients - blood pressure control, hemoglobin A1C control, LDL control.
4. Proposal to Advisory Council
Chronic Disease Measures from FP
 - Diabetes –NQF59, HbA1c<9, PQRS1,
 - Hypertension – NQF18

- Heart Failure- NQF81
- Coronary Artery Disease (CAD) – NQF74,PQRS197
- Asthma- NQF36, PQRS311 and PQRS53
- Chronic Obstructive Pulmonary Disease (COPD)- PQRS52 and NQF102

(Wait to start setting targets after the whole system is in place for the commission, etc)

Preventive Measures

- Weight Management
 - Adults NQF421, PQRS128
 - Children NQF24
- Immunizations
 - Adults NQF41
 - Children NQF38
- Tobacco Use – NQF28

Patient Access/Experience/Utilization?

- Yield to NCQA recognition standards.
- Council directs practices that this is an important aspect of PCMH measurement.

Cancer screening – 3measures

- Breast – NQF31
- Colorectal – NQF34

5. Quality Metrics subcommittee next steps

The subcommittee will not schedule to meet again until further notice. They will report the initial set of measures to the council at the June 6th meeting. In the meantime, the QM subcommittee must confirm HSM's involvement. At the June 6th meeting, when the QM subcommittee reports, the council will direct them as to whether they will continue or transform with a new scope.

Adjourn at 3:26pm

DRAFT